

# **Demand Management Plan**

03/07/2017

BlackpoolCouncil

### **The Blackpool Ambition**

- Building confidence to ensure children and their families get the right service, at the right time for the right purpose.
- A proactive demand management approach which starts with positive, challenging leadership and ends with building community resilience.
- Developing support which enables children to maintain their community support networks by ensuring placement availability close to home.
- Reducing the number of Looked after Children by 20% in the year 2017/2018
- Increasing the quality and consistency of assessments and risk management approaches across the service.
- Having a skilled, experienced workforce of practitioners and managers who provide Early Help and collectively manage risk, meeting presenting needs and preventing unnecessary contacts, referrals and statutory assessments.

#### The Blackpool Challenge

- How do we deliver lasting, positive, constructive change in a time of resource and performance pressure?
- How do we support families that are able to recognise they have additional need to access the right support at the right time from the right source?
- How do services work together in order to intervene proportionality and appropriately where there is a need to protect children?
- How do we help practitioners to recognise that the wrong level of intervention can be as damaging to children as not intervening?
- How can significantly reducing resources be deployed to have the most impact and achieve good outcomes?

| Action  | Detail   | Responsible<br>Officer (s)   | Anticipated Outcomes   | Timescale | Comment/ Update  |
|---|--|--|--|-----------|--|
| A1 New "Continuum of Need" which is in line with thresholds applied by Lancashire   | 1a<br>CoN agreed by<br>the Safeguarding<br>Childrens Board             | Blackpool Safeguarding Childrens Board (via Diane Booth)             | More consistent decision making, clarity for partner agencies and internally.  | June 2017 | New approach agreed at 7 <sup>th</sup> June<br>Safeguarding Board<br>COMPLETE                                    |
| and Blackburn with Darwen, to provide continuity for schools, health, police etc. working across organisations agreed at Safeguarding | 1b Revised early help assessment and planning documentation rolled out | Blackpool<br>Safeguarding<br>Childrens<br>Board (via<br>Diane Booth) | Documentation supporting asset based assessment and planning — enabling early help interventions by the right resource and supporting joint working. | Sept 2017 | Workshops and roll out of new Early Help documentation is underway – due to conclude (bar mop ups) September 17. |
| Childrens Board and implemented.  | 1c Staff/ partnership briefings on new CoN delivered                   | Josie Lee  | All staff briefed  | Sept 2017 | Roll out of new CoN and associated documentation commenced June 2017 – due to conclude (bar mop ups) Sept 17.    |
|   | 1d<br>Refreshed CoN is<br>operational                                  | Josie Lee  | Continuum of Need embedded in service and partner agencies.  | Sept 2017 | To coincide with new School term.  |

Impact on KPIs – DIRECT. The number of early help assessments which lead to a single, or multi agency plan without referral to social care will be maintained or increase as agencies will be clear about the level at which further intervention is required.

Impact on KPIs –CONSIQUENTIAL. Longer term, if there is a continuum of need which is widely understood, accepted and applied, the number of contacts will reduce, and there will be a reflection in conversion rates from contact to referral and referral to assessment.

By When? – Following implementation and roll out in September, direct and consequential impacts should be evident in the KPIs by January 2018.

| A2                       | 2a                                    | Moya Foster   | Engage and consult with       | September 2017 | Engagement activity with partners has taken |
|--------------------------|---------------------------------------|---------------|-------------------------------|----------------|---|
| Develop a multi-         | Write and                             |               | partner agencies to           | - Cop (C       | place. First draft of strategy is now being |
| agency early help        | publish refreshed                     |               | ensure all early help         |                | updated with feedback.                      |
| strategy for Blackpool   | Early Help                            |               | services are captured in      |                |   |
| which clearly outlines   | Strategy for                          |               | strategic planning. Early     |                |   |
| the expectations on      | Blackpool                             |               | Help offer is well            |                |   |
| providers of services to | Вискрост                              |               | understood and                |                |   |
| families across the      |                                       |               | stakeholder agencies can      |                |   |
| town – and is about      |                                       |               | demonstrate that it is        |                |   |
| prevention through       |                                       |               | implemented.                  |                |   |
| the utilisation of       | 2b                                    | Moya          | Internal support services     | September 2017 |   |
| services already         | Develop and                           | Foster/ Cindy | available to strengthen       | September 2017 |   |
| engaged.                 | articulate a clear                    | Hunter        | family resilience will be     |                |   |
| chigagea.                | vision and                            | Tidittei      | utilised to facilitate        |                |   |
|                          | strategy of how                       |               | positive step down plans      |                |   |
|                          | Social Care and                       |               | from statutory services.      |                |   |
|                          | Internal Early                        |               | inom statutory services.      |                |   |
|                          | Intervention                          |               |                               |                |   |
|                          | services will work                    |               |                               |                |   |
|                          | together to build                     |               |                               |                |   |
|                          | preventative and                      |               |                               |                |   |
|                          | •                                     |               |                               |                |   |
|                          | recovery capacity<br>(FiN, Children's |               |                               |                |   |
|                          | Centres, Better                       |               |                               |                |   |
|                          | Start, Head Start,                    |               |                               |                |   |
|                          | ·                                     |               |                               |                |   |
|                          | etc.)<br>2c                           | Mova          | Clarity for all               | Contombor 2017 |   |
|                          |                                       | Moya          | Clarity for all               | September 2017 |   |
|                          | Develop "early                        | Foster/ Cindy | Safeguarding and              |                |   |
|                          | help offer on a                       | Hunter        | Permanence teams on           |                |   |
|                          | page" product                         |               | the support available via EH. |                |   |
|                          | 2d                                    | Kathy         | Long term – reduction in      | September 2017 | Clear guidance being developed jointly by   |
|                          | Develop clear                         | Gardener/     | re referral rates,            |                | Kathy Gardener and Suzy Robertson.          |

| step down/       | Suzy      | reduction in contacts/ | Needs to be brought in to discussions about |
|------------------|-----------|------------------------|---|
| direct access    | Robertson | referrals at the front | Journey of the Child.                       |
| process to FiN   |           | door.                  | Proposal for a new approach to receiving    |
| and other        |           |                        | concerns which may not require a statutory  |
| services where   |           |                        | intervention will be presented to CMT.      |
| statutory        |           |                        |   |
| intervention not |           |                        |   |
| required         |           |                        |   |

Impact on KPIs – DIRECT. Referrals to FiN from external and internal services will be appropriate and will be outcome focussed.

Impact on KPIs – CONSIQUENTIAL. Longer term, the relationship between FiN and Children's Social Care will continue to improve and communication and joint working will be evident across cases.

By When? – Following implementation and roll out in September, direct and consequential impacts should be evident in the KPIs by January 2018.

|                        |                  |             | •                     |                | - · · · · · · · · · · · · · · · · · · ·       |
|------------------------|------------------|-------------|-----------------------|----------------|---|
| A3                     | 3a               | Diane Booth | Anticipate immediate  | September 2017 | Early discussions have taken place with local |
| Review aims and        | Speak to Police  |             | reduction in contact  |                | and regional Police stakeholders about the    |
| objectives of MASH     | about no longer  |             | volumes.              |                | suitability of the MASH process in Blackpool  |
| and lead on systems    | sharing          |             |                       |                | and a fundamental shift in approach           |
| redesign for Blackpool | "standard" PVPs. |             |                       |                | including ceasing "standard" PVPs.            |
| which targets          |                  |             |                       |                | Meeting scheduled for 31 July 2017.           |
| appropriate resource   | 3b               | Diane Booth | A new approach is     | November 2017  | Key questions currently being worked          |
| from Police and social | Work with Police |             | designed, agreed and  |                | through - should MASH sit with CSC duty or    |
| care focussed on       | to redesign a    |             | resources in place to |                | would more of an early help focus be          |
| determining the right  | multi-agency     |             | deliver a new way of  |                | appropriate?                                  |
| intervention designed  | "receive, review |             | working that reduces  |                | Can there be more face to face joint          |
| to prevent escalations | and respond"     |             | unnecessary contacts  |                | assessment and intervention rather than       |
| to formal services     | approach to      |             | long term.            |                | information exchange?                         |
|                        | concerns raised  |             |                       |                |   |
|                        | through the PVP  |             |                       |                | Mash group formed – draft new ways of         |
|                        | process that is  |             |                       |                | working to be circulated ahead of meeting     |
|                        | more focussed    |             |                       |                | date in September 2017.                       |
|                        | on the right     |             |                       |                |   |
|                        | person/ agency   |             |                       |                |   |
|                        | responding when  |             |                       |                |   |

| a response |  |  |
|------------|--|--|
| required.  |  |  |

Impact on KPIs – DIRECT. There will be a reduction in the number of "contacts" attributable to the MASH process.

Impact on KPIs –CONSIQUENTIAL. – A different approach to introduce genuine multi-disciplinary working with the Police and Health will support early help and preventative work. There will be more early help plans which have the Police, Schools and Health working together without statutory Social Care involvement.

By When? - Following implementation and roll out by December 2018, direct and consequential impacts should be evident in the KPIs by January 2018.

| by when? - rollowing if | inprementation and | roll out by Dece | iniber 2016, ulrect and conse | equentiai impacts s | nould be evident in the KPIS by January 2018. |
|-------------------------|--------------------|------------------|-------------------------------|---------------------|---|
| A4                      | 4a                 | Cindy Hunter     | Clear and Evidenced           | June 2017           | Revised scheme of delegation signed off and   |
| Embed defensible        | Revise and share   |                  | Decision Making at all        |                     | operationally implemented.                    |
| decision making at the  | scheme of          |                  | points in the journey of      |                     | COMPLETE                                      |
| right level for work    | delegation         |                  | the child.                    |                     |   |
| presented to Childrens  | documents          |                  |                               |                     |   |
| Social Care which is    | including early    |                  |                               |                     |   |
| proportionate to risk   | oversight from     |                  |                               |                     |   |
| and commitment.         | management on      |                  |                               |                     |   |
|                         | decision making.   |                  |                               |                     |   |
| Develop a risk          | 4b                 | Cindy Hunter     | Challenging the               | September 2017      | Message has been cascaded, audits required    |
| management approach     | Ensure no          |                  | relationship with other       |                     | to ensure compliance.                         |
| to support effective    | Section 17         |                  | agencies ensuring that        |                     |   |
| practice, determine     | assessments are    |                  | assessments are in place      |                     |   |
| learning needs of       | accepted without   |                  | before referrals are          |                     |   |
| managers, develop and   | clear informed     |                  | accepted.                     |                     |   |
| deliver training.       | consent and        |                  |                               |                     |   |
|                         | receipt of         |                  |                               |                     |   |
|                         | appropriate        |                  |                               |                     |   |
|                         | assessment         |                  |                               |                     |   |
|                         | documents.         |                  |                               |                     |   |
|                         | 4c                 | Cindy            | Ensuring that the IRO is      | September 2017      |   |
|                         | Embed              | Hunter/          | engaged in the process at     |                     |   |
|                         | Independent        | Steve Cook       | the right time to support     |                     |   |
|                         | Reviewing Officer  |                  | effective case                |                     |   |
|                         | role in to Initial |                  | progression.                  |                     |   |

| Clattet Du | estaction          |                              |                |                                      |
|------------|--------------------|------------------------------|----------------|--------------------------------------|
|            | otection           |                              |                |                                      |
| Confere    |                    |                              |                |                                      |
|            | n making           |                              |                |                                      |
| 4d         | Cindy              | Ensure that there are        | September 2017 |                                      |
| Ensure     | Hunter/            | clear "checkpoints"          |                |                                      |
| assessm    | nent Kathy         | throughout the life of a     |                |                                      |
| checkpo    | oints are Gardener | case for managers to         |                |                                      |
| establis   | hed and            | review with case holders     |                |                                      |
| embedo     | ded                | what progress is being       |                |                                      |
| through    | n the              | made and challenge the       |                |                                      |
| I -        | ssessment          | input and outcomes           |                |                                      |
| process    |                    | being achieved.              |                |                                      |
| 4e         | Tony               | A risk management tool       | July 2017      | Complete – Risk Sensible model to be |
| Evaluat    |                    | supporting positive case     | 341, 2017      | applied in Blackpool.                |
|            | entation           | management approach in       |                | арриса ит вискроот.                  |
| •          | Sensible"          | place to support             |                |                                      |
| type ap    |                    | assessment and decision      |                |                                      |
|            | red tool as        |                              |                |                                      |
| •          |                    | making process.              |                |                                      |
|            | in use in          |                              |                |                                      |
| Lancs a    |                    |                              |                |                                      |
| so redu    |                    |                              |                |                                      |
| training   |                    |                              |                |                                      |
| •          | ment for           |                              |                |                                      |
| agencie    | s working          |                              |                |                                      |
| across     |                    |                              |                |                                      |
| bounda     |                    |                              |                |                                      |
| 4f         | Diane Booth        |                              | August 2017    |                                      |
| Purchas    | se model           |                              |                |                                      |
| 4g         | Tony               |                              | September 2017 |                                      |
| Implem     | ent new Morrissey  |                              |                |                                      |
| way of v   | working            |                              |                |                                      |
| 1          | g model            |                              |                |                                      |
| 4h         | Cindy Hunte        | r Clarity for all workers on | September 2017 |                                      |

| T   | ı                  |              |                              |                | T |
|-----|--------------------|--------------|------------------------------|----------------|---|
|     | Development        |              | the expected standards of    |                |   |
|     | and delivery of    |              | service, recording and       |                |   |
| -   | practice           |              | timelines which they are     |                |   |
| S   | standards to       |              | required to comply with.     |                |   |
|     | include            |              |                              |                |   |
| c   | compliance with    |              |                              |                |   |
| d   | data               |              |                              |                |   |
| r   | requirements.      |              |                              |                |   |
| 4   | 4i                 | Cindy Hunter | Compliance standards         | September 2017 |   |
| E   | Ensure that all    |              | will be met.                 |                |   |
| l v | work transferred   |              |                              |                |   |
| fı  | from team to       |              |                              |                |   |
| to  | team is done to a  |              |                              |                |   |
| c   | consistently high  |              |                              |                |   |
| S   | standard with all  |              |                              |                |   |
| k   | key work           |              |                              |                |   |
| c   | completed          |              |                              |                |   |
| b   | before transfer    |              |                              |                |   |
| р   | point.             |              |                              |                |   |
| 4   | <b>4</b> j         | Cindy        | It will be clear to all plan | September 2017 |   |
| V   | Where work is      | Hunter/      | participants what            |                |   |
| l u | "shared"           | Moya Foster. | outcomes are to be           |                |   |
| b   | between teams/     |              | delivered to support the     |                |   |
| S   | services working   |              | child/ young person and      |                |   |
| to  | together to        |              | no plans will be working     |                |   |
| n   | manage risk and    |              | in opposition.               |                |   |
| a   | achieve            |              |                              |                |   |
| 0   | outcomes one       |              |                              |                |   |
| c   | consistent plan    |              |                              |                |   |
|     | should be          |              |                              |                |   |
| d   | developed and a    |              |                              |                |   |
|     | lead professional  |              |                              |                |   |
| ic  | identified to hold |              |                              |                |   |

| and up  | date it.     |   |
|---------|--------------|---|
| 4k      | Cindy Hunter | Auditors are in place and providing effective |
| Audits  | to take      | feedback.                                     |
| place a | cross        |   |
| cases a | nd to lead   |   |
| to deve | elopment     |   |
| of impr | oved         |   |
| recordi | ng and       |   |
| lessons | learned.     |   |

Impact on KPIs – DIRECT. Staff will have clarity about the decision making process and there will be evidence that thresholds and risk tools are applied in appropriate considerations. There will be evidence of improved compliance with recording standards. Audits will evidence good workflow management and a reduction in drift and delay. Transfers between teams will be safe and effective and in the best interests of the child. Decision making in relation to risk will be well evidenced and supported by a clear toolkit.

Impact on KPIs –CONSIQUENTIAL. – Staff confidence and recording quality will improve with the tools in place to support the assessment and recording process. Fewer cases will be referred up to senior managers for decision making where they do not agree with the recommendation from the worker and their manager. There will be a reduction in section 47 enquiry rates which are currently high.

By When? – Following implementation and roll out by September 2018, direct and consequential impacts should be evident in the KPIs by January 2018.

| A5                      | 5a                 | Tony      | Managers at all levels will | September 2017 | Business Information Team (BIT) working     |
|-------------------------|--------------------|-----------|-----------------------------|----------------|---|
| Develop data set to     | Dashboard of       | Morrissey | have access to the          |                | with CSMT to develop and deliver new        |
| support management      | performance        |           | performance information     |                | dashboard and reports which are accessible  |
| oversight at all levels | indicators         |           | which supports effective    |                | directly by the manager.                    |
| regarding demand at     | available to first |           | decision making and         |                | Timetable for delivery of new reports is in |
| the Front Door which is | line managers      |           | resource management.        |                | place with clear prioritisation.            |
| live, and supports      | support resource   |           | Improve compliance with     |                |   |
| effective decision      | management to      |           | key performance             |                |   |
| making and resource     | ensure             |           | indicators that are within  |                |   |
| management              | compliance.        |           | managers control i.e.–      |                |   |
|                         |                    |           | - % assessments             |                |   |
|                         |                    |           | completed within 45 days    |                |   |
|                         |                    |           | - section 47 enquiries      |                |   |
|                         |                    |           | initiated                   |                |   |

Impact on KPIs – DIRECT. There will be evidence of the application of the performance information with an increase in compliance KPIs including assessments within timescales, LAC and CP visits etc.

Impact on KPIs –CONSIQUENTIAL. – Managers use of data will become more sophisticated and they will start to direct the BIT team to support them to get the information they need to direct performance improvements.

By When? – Following implementation and roll out by September 2018, direct and consequential impacts should be evident in the KPIs by January 2018.

| A6                      | 6a               | Sara Coombs | Reduced calls to front | Sept 17 | Systems team to research the cost and           |
|-------------------------|------------------|-------------|------------------------|---------|---|
| Consider the            | Business case to |             | door to check basic    |         | delivery plan for a portal for consideration of |
| implementation of a     | be developed to  |             | information (whether   |         | a business case.                                |
| portal to MOSAIC to     | outline cost/    |             | case is open, name of  |         |   |
| allow third parties to  | benefit analysis |             | allocated worker) and  |         |   |
| directly input          | of a portal from |             | increased quality of   |         |   |
| information on to the   | Corelogic.       |             | information exchange.  |         |   |
| system and allow        |                  |             |                        |         |   |
| authorised third        |                  |             |                        |         |   |
| parties to access basic |                  |             |                        |         |   |
| information             |                  |             |                        |         |   |

#### How will we know if this has been effective?

Impact on KPIs – DIRECT. There will be a reduction in the volume of calls at the front door services to obtain basic information as this will be accessible directly.

Impact on KPIs –CONSIQUENTIAL. – Information sharing and joint working across agencies will be more easily facilitated.

### By When? April 2018.

| A7                    | 7a                | Diane Booth | More focus on           | Sept 17 | Recruitment complete – new employee to               |
|-----------------------|-------------------|-------------|-------------------------|---------|--|
| Consider services     | Recruit new       |             | compliance and service  |         | join service managers on the 14 <sup>th</sup> August |
| currently within      | Service Manager   |             | development through     |         |  |
| management scope      | to support a      |             | increased focus in both |         |  |
| and ensure that focus | reduction in the  |             | provider and LAC teams. |         |  |
| is on statutory       | workload of the   |             |                         |         |  |
| functions and         | current "our      |             |                         |         |  |
| management time is    | Children" service |             |                         |         |  |
| released to develop   | manager           |             |                         |         |  |
| practice and system   |                   |             |                         |         |  |

| -landaria |  |  |  |
|-----------|--|--|--|
| change.   |  |  |  |

Impact on KPIs – DIRECT. Team managers will reports feeling more supported, and Service Manager attention will be possible in "lower risk" and "lower volume" areas than is currently possible with existing resource.

Impact on KPIs –CONSIQUENTIAL. – There will be more development and engagement activity from provider services and any concerns about conflict of interest which are current will be allayed.

# By When? – Following implementation and roll out by September 2018, direct and consequential impacts should be evident in the KPIs by January 2018.

| A8                       | 8a                | Moya Foster | Ensure that there are      | Sept 2017   |                                      |
|--------------------------|-------------------|-------------|----------------------------|-------------|--------------------------------------|
| Understand financial     | Blackpool Young   |             | appropriate steps in place | •           |                                      |
| pressures and ensure     | Peoples Service   |             | to support young people    |             |                                      |
| robust processes and     | to develop a plan |             | to budget and make         |             |                                      |
| sign off procedures are  | to review and     |             | positive and responsible   |             |                                      |
| in place for all         | address concerns  |             | spending decisions         |             |                                      |
| appropriate spend.       | about care leaver |             |                            |             |                                      |
| Ensure that payments     | financial         |             |                            |             |                                      |
| from individuals and     | management to     |             |                            |             |                                      |
| other agencies are       | ensure that       |             |                            |             |                                      |
| recovered promptly,      | spend is          |             |                            |             |                                      |
| that children are        | appropriate and   |             |                            |             |                                      |
| supported to budget as   | proportionate     |             |                            |             |                                      |
| part of their transition | and that there no |             |                            |             |                                      |
| to adulthood and that    | duplication of    |             |                            |             |                                      |
| spend is appropriately   | commitment or     |             |                            |             |                                      |
| controlled.              | spend between     |             |                            |             |                                      |
|                          | social workers    |             |                            |             |                                      |
|                          | and PAs           |             |                            |             |                                      |
|                          | 8b                | Diane Booth | Staff and managers will    | August 2017 | Complete – information now shared at |
|                          | Transparency of   |             | have a greater level of    |             | CSMT.                                |
|                          | budget regularly  |             | understanding of the       |             |                                      |
|                          | shared with staff |             | relationship between       |             |                                      |
|                          | and team          |             | performance and budget.    |             |                                      |
|                          | managers          |             |                            |             |                                      |

| I                        |  | - ·               |                                 |                       |   |
|--------------------------|--|-------------------|---------------------------------|-----------------------|---|
|                          | 8c                                       | Diane Booth       | There will be a clear           | October 2017          |   |
|                          | Develop a                                |                   | policy statement on the         |                       |   |
|                          | Charging Policy                          |                   | responsibility of parents       |                       |   |
|                          | for Children in                          |                   | to contribute in                |                       |   |
|                          | Care.                                    |                   | appropriate                     |                       |   |
|                          |  |                   | circumstances to the cost       |                       |   |
|                          |  |                   | of care.                        |                       |   |
| How will we know if this | _  |                   |                                 |                       |   |
| Impact on KPIs – DIRECT. | The budget pressu                        | re will reduce ov | ver the year.                   |                       |   |
| Impact on KPIs -CONSIQ   | <mark>UENTIAL</mark> . <i>–</i> Projects | and initiatives v | which are designed as invest    | to save will be possi | ble and will deliver long term benefits.            |
|                          |  |                   | By When? – April 2018           |                       |   |
| A9                       | 9a                                       | Cindy Hunter      | A revised panel process         | August 2017           |   |
| Ensure that there are    | Review panel                             |                   | which is focussed and is        |                       |   |
| clear terms of           | arrangements in                          |                   | making anticipatory             |                       |   |
| reference for all panel  | place for the key                        |                   | decisions.                      |                       |   |
| meetings and all         | decisions and                            |                   |                                 |                       |   |
| submission               | ensure they are                          |                   |                                 |                       |   |
| requirements are         | focussed and                             |                   |                                 |                       |   |
| proportionate and        | effective.                               |                   |                                 |                       |   |
| built in to MOSAIC       | 9b                                       | Cindy Hunter      |                                 | December 2017         |   |
|                          | New processes                            |                   |                                 |                       |   |
|                          | built in to                              |                   |                                 |                       |   |
|                          | MOSAIC when                              |                   |                                 |                       |   |
|                          | required                                 |                   |                                 |                       |   |
| How will we know if this | has been effective                       | ?                 |                                 |                       |   |
|                          |  |                   | on cases as time is freed up fi |                       |   |
| Impact on KPIs –CONSIQ   | UENTIAL. — Quality (                     | of recording and  | l decision making will improv   | e as panel process i  | s more focussed and timely.                         |
|                          |  |                   | By When? – January 201          | 8                     |   |
| A10                      | 10a                                      | CSMT/             | Timely decisions will be        | December 2017         | 1 <sup>st</sup> Journey of the child session held – |
| Understand the issues    | Review the                               | Dartington/       | taken to support the            |                       | Dartington co-facilitated. Plans in place for       |
| that create delay and    | journey of the                           | CDU               | incremental                     |                       | next session to build on lessons learned.           |
| unnecessary transfer     | child through the                        |                   | transformation of the           |                       | Future workshops will be full days.                 |
| points through the       | whole system                             |                   | service at a pace which         |                       |   |

| Journey of the Child | and functions.  |              | delivers performance improvement and takes       |           |   |
|----------------------|---|--------------|--|-----------|---|
|                      | 10b<br>Review the care<br>planning process                          | Cindy Hunter | staff and service users on a supportive journey. | Sept 2017 |   |
|                      | 10c Amalgamate under and over 12s teams to create a permanence team | Vera Hadwin  |  | Sept 2017 | Staff consultation has closed and feedback received. Implementation to progress with a supportive training plan.  Unions consulted. |
|                      | 10d Review and reduce paperwork in place supporting practice        | Cindy Hunter |  | Sept 2017 |   |
|                      | 10e Develop robust monitoring systems and management oversight      | Cindy Hunter |  | Sept 2017 |   |
|                      | 10f Develop data set to support tracking and outcomes               | CDU/ BIT     |  | Sept 2017 |   |

Impact on KPIs – DIRECT. Change will be impactful on the budget pressure, LAC and CiN figures.

Impact on KPIs –CONSIQUENTIAL. – Staff will be engaged in a change programme and understand the need for change.

| By When? – April 2018 |                 |       |                           |              |   |  |  |  |
|-----------------------|-----------------|-------|---------------------------|--------------|---|--|--|--|
| A11                   | 11a             | Josie | There will be a model     | October 2017 | Data requirements to be met by second                   |  |  |  |
| Work with Dartington  | Develop         | Lee/  | built by Dartington which |              | week in August, Dartington workshops                    |  |  |  |
| to build a model for  | workshop format | CDU   | has been based on the     |              | arranged to review Systems Map for 12 <sup>th</sup> and |  |  |  |
| the social care       | to share System |       | Blackpool system and has  |              | 13 <sup>th</sup> Sept, stakeholders from across social  |  |  |  |
| legislative system    | Dynamic theory  |       | retrospective data which  |              | care, education, health and police invited to           |  |  |  |
| design that can be    | with key staff  |       | can be used to forecast   |              | attend.   |  |  |  |
| used to forecast the  | and             |       | the impact of prospective |              |   |  |  |  |
| impact of structural, | stakeholders.   |       | change on performance     |              |   |  |  |  |
| practice and process  | Develop data to |       |                           |              |   |  |  |  |
| change on             | support         |       |                           |              |   |  |  |  |
| performance.          | retrospective   |       |                           |              |   |  |  |  |
|                       | data modelling. |       |                           |              |   |  |  |  |

Impact on KPIs – DIRECT. The model will forecast the impact of change on the KPIs and this will be delivered as expected.

Impact on KPIs –CONSIQUENTIAL. – Future change will be tested in the model before implementation and improvements will be clearly monitored.

# By When? - July 2018

| A12                   | 12a              | Kate Aldridge | There will be an          | October 201 |
|-----------------------|------------------|---------------|---------------------------|-------------|
| Review all plans and  | A review to take |               | understanding of where    |             |
| outcomes from         | place of audits, |               | recommendations have      |             |
| reviews over past two | SCR outcomes,    |               | been made that have not   |             |
| years and ensure      | commissioning    |               | been implemented, and     |             |
| actions have either   | reviews and      |               | the reason why, so that   |             |
| been implemented or   | action plans to  |               | these can be              |             |
| plans are clear on    | be checked for   |               | implemented if they       |             |
| delivery.             | implementation.  |               | remain relevant, or       |             |
|                       |                  |               | lessons can be learned to |             |
|                       |                  |               | ensure that future        |             |
|                       |                  |               | recommendations for       |             |
|                       |                  |               | change are seen through.  |             |

# How will we know if this has been effective?

Impact on KPIs – DIRECT. There will be evidence of the application of the performance information with an increase in compliance KPIs and reduction in Sec 47 enquiries.

Impact on KPIs –CONSIQUENTIAL. – Managers use of data will become more sophisticated and they will start to direct the BIT team to support them to get the information they need to direct performance improvements.

By When? – Following implementation and roll out by September 2018, direct and consequential impacts should be evident in the KPIs by January 2018.

| A13                  | 13a                | Diane Booth | July 2018 | Dates sent to all teams |
|----------------------|--------------------|-------------|-----------|-------------------------|
| DCS to review        | Visioning and      |             |           |                         |
| communication        | Engagement         |             |           |                         |
| methods and          | Days to be         |             |           |                         |
| frequency.           | delivered directly |             |           |                         |
| Impact to be         | to all staff.      |             |           |                         |
| monitored with staff | 13b                | Diane Booth | July 2018 | Brief cascaded weekly   |
| group.               | New "brief" sent   |             |           | ·                       |
|                      | weekly from DCS.   |             |           |                         |

#### How will we know if this has been effective?

Impact on KPIs – DIRECT. Staff will report an improvement in communications.

Impact on KPIs –CONSIQUENTIAL. – Staff will receive a single, clear message and feel engaged in a transformative service.

# By When? - April 2018

| A14                   | 14a               | CSMT |                         | July 2018 |                            |
|-----------------------|-------------------|------|-------------------------|-----------|----------------------------|
| Improve approach to   | Ensure that there |      |                         |           |                            |
| staff recruitment and | is a robust       |      |                         |           |                            |
| retention across the  | business case for |      |                         |           |                            |
| service               | all recruitment   |      |                         |           |                            |
|                       | requests made to  |      |                         |           |                            |
|                       | CLT               |      |                         |           |                            |
|                       | Implement         | CSMT | Data cleansing will be  | July 2018 | Implementation under way . |
|                       | support           |      | brought up to date, and |           |                            |
|                       | identified to     |      | recording quality and   |           |                            |
|                       | improve           |      | compliance will be      |           |                            |
|                       | retention         |      | supported.              |           |                            |
|                       | including         |      |                         |           |                            |
|                       | "compliance       |      |                         |           |                            |
|                       | Fridays" and      |      |                         |           |                            |
|                       | "stop the clock"  |      |                         |           |                            |

|   | days.  |             |  |           |  |  |  |  |  |  |
|---|--|-------------|--|-----------|--|--|--|--|--|--|
| How will we know if this has been effective?  |  |             |  |           |  |  |  |  |  |  |
| Impact on KPIs – DIRECT. Recruitment will progress more promptly through the system and the quality of business cases will improve. Staff will report |  |             |  |           |  |  |  |  |  |  |
| feeling more supported and express a desire to remain with the service.   |  |             |  |           |  |  |  |  |  |  |
| Impact on KPIs -CONSIQ  | Impact on KPIs –CONSIQUENTIAL. – Retention rates will improve. |             |  |           |  |  |  |  |  |  |
| By When? – October 203  | By When? – October 2017.                                       |             |  |           |  |  |  |  |  |  |
| A15   | 15a  | Moya Foster |  | Sept 2017 |  |  |  |  |  |  |
| Ensure that new and   | Implement and  |             |  |           |  |  |  |  |  |  |
| developing services   | evaluate joint   |             |  |           |  |  |  |  |  |  |
| have clear plans and  | working project  |             |  |           |  |  |  |  |  |  |
| governance and risk   | with key lead  |             |  |           |  |  |  |  |  |  |
| management  | workers in the   |             |  |           |  |  |  |  |  |  |
| arrangements in place.  | Blackpool Young  |             |  |           |  |  |  |  |  |  |
| Including the Link,   | Peoples service  |             |  |           |  |  |  |  |  |  |
| BYPS, Pause etc.  | and share  |             |  |           |  |  |  |  |  |  |
|   | learning points.   |             |  |           |  |  |  |  |  |  |
|   | 15b  | Moya Foster |  | Sept 2017 |  |  |  |  |  |  |
|   | Ensure that there  |             |  |           |  |  |  |  |  |  |
|   | are clear impact   |             |  |           |  |  |  |  |  |  |
|   | measures   |             |  |           |  |  |  |  |  |  |
|   | defined for  |             |  |           |  |  |  |  |  |  |
|   | Blackpool Young  |             |  |           |  |  |  |  |  |  |
|   | Peoples Service  |             |  |           |  |  |  |  |  |  |
|   | 15c  | Vera Hadwin |  | Sept 2017 |  |  |  |  |  |  |
|   | Ensure that there  |             |  |           |  |  |  |  |  |  |
|   | are clear impact   |             |  |           |  |  |  |  |  |  |
|   | measures   |             |  |           |  |  |  |  |  |  |
|   | defined for The  |             |  |           |  |  |  |  |  |  |
|   | Link   |             |  |           |  |  |  |  |  |  |
|   | 15d  | Moya Foster |  | Sept 2017 |  |  |  |  |  |  |
|   | Ensure that there  |             |  |           |  |  |  |  |  |  |
|   | are clear impact   |             |  |           |  |  |  |  |  |  |
|   | measures   |             |  |           |  |  |  |  |  |  |

|  | defined for Pause |             |  |               |  |  |  |
|--|-------------------|-------------|--|---------------|--|--|--|
|  | 15e               | Steve Cook/ |  | Sept 2017     |  |  |  |
|  | Review the        | Josie Lee   |  |               |  |  |  |
|  | Family Group      |             |  |               |  |  |  |
|  | Conferencing      |             |  |               |  |  |  |
|  | offer, and        |             |  |               |  |  |  |
|  | pathways          |             |  |               |  |  |  |
|  | targeting edge of |             |  |               |  |  |  |
|  | care.             |             |  |               |  |  |  |
|  | 15f               | CSMT        |  | December 2017 |  |  |  |
|  | Determine any     |             |  |               |  |  |  |
|  | gaps in service   |             |  |               |  |  |  |
|  | evident in early  |             |  |               |  |  |  |
|  | help and/ or      |             |  |               |  |  |  |
|  | social care and   |             |  |               |  |  |  |
|  | consider how this |             |  |               |  |  |  |
|  | can be addressed  |             |  |               |  |  |  |
| How will we know if this has been effective? |                   |             |  |               |  |  |  |

Impact on KPIs – DIRECT. Projects will have identified KPIs which are measurable and outcome focussed.

Impact on KPIs –CONSIQUENTIAL. – Areas where joint working is effective will be used as learning tools for further developments.

By When? – Following implementation and roll out by September 2018, direct and consequential impacts should be evident in the KPIs by January 2018.

| A16                   | 16a              | Josie Lee | Joint work with Housing |  |
|-----------------------|------------------|-----------|-------------------------|--|
| Review positive       | Develop a        |           | needs will lead to a    |  |
| pathways for homeless | positive pathway |           | strategy and process    |  |
| 16/17 year olds and   | which supports   |           | which is supportive and |  |
| care leavers.         | young people to  |           | preventative.           |  |
|                       | access and       |           |                         |  |
|                       | maintain         |           |                         |  |
|                       | appropriate      |           |                         |  |
|                       | housing          |           |                         |  |

How will we know if this has been effective?

Impact on KPIs – DIRECT. Young people will not become LAC because of a lack of appropriate housing.

| alternative way.         | UENTIAL. –Housing  | strategy will sup | port LAC as well as ensuring | that LAC status is n | ot applied where needs can be met in an  |
|--------------------------|--------------------|-------------------|------------------------------|----------------------|--|
| By When? – April 2018    | ·                  | Ι                 |                              |                      |  |
| A17                      | 17a                | Josie Lee         |                              | August 2017          |  |
| Develop and roll out a   | Increase           |                   |                              |                      |  |
| phased discharge         | adoption activity  |                   |                              |                      |  |
| strategy which           | – including        |                   |                              |                      |  |
| supports a positive risk | reviewing the      |                   |                              |                      |  |
| management               | process in place   |                   |                              |                      |  |
| approach, is             | to ensure that     |                   |                              |                      |  |
| proportionate to         | local families are |                   |                              |                      |  |
| capacity, is focussed    | encouraged to      |                   |                              |                      |  |
| and dynamic.             | adopt in           |                   |                              |                      |  |
|                          | Blackpool.         |                   |                              |                      |  |
|                          | 17b                | Josie Lee         |                              | August 2017          | Discharge plan in place and shared with  |
|                          | Understand the     |                   |                              |                      | CSMT and CLT – implementation underway.  |
|                          | current LAC        |                   |                              |                      |  |
|                          | cohort and         |                   |                              |                      |  |
|                          | identify cases     |                   |                              |                      |  |
|                          | where              |                   |                              |                      |  |
|                          | accelerated        |                   |                              |                      |  |
|                          | discharge is an    |                   |                              |                      |  |
|                          | option to          |                   |                              |                      |  |
|                          | explore.           |                   |                              |                      |  |
|                          | 17c                | Josie Lee         |                              | August 2017          | CLT approval received and implementation |
|                          | Phase one of       | 133.0 200         |                              | 7.00000 2017         | underway.                                |
|                          | detailed           |                   |                              |                      | under way.                               |
|                          | discharge plan     |                   |                              |                      |  |
|                          | approved and       |                   |                              |                      |  |
|                          | implemented        |                   |                              |                      |  |
|                          | 17d                | Josie Lee         |                              | October 2017         |  |
|                          | Phase 2 of         | 20010 200         |                              | 200000. 2017         |  |

detailed

|  | discharge plan   |            |           |  |
|--|------------------|------------|-----------|--|
|  | approved and     |            |           |  |
|  | implemented      |            |           |  |
|  | 17e              | Steve Cook | July 2017 |  |
|  | Introduce and    |            |           |  |
|  | embed IRO        |            |           |  |
|  | midpoint reviews |            |           |  |

Impact on KPIs – DIRECT. Discharge activity will increase and we will not see a consequential impact on the front door with cases being re referred due to poor discharge planning. Spend on adoption placement costs will reduce, without a reduction in adoption numbers.

Impact on KPIs –CONSIQUENTIAL. – New ways of working will develop to reduce drift and delay and ensure that children and young people are only "looked after" or on a plan for the period that this is beneficial and necessary.

# By When? – Following implementation and roll out by September 2018, direct and consequential impacts should be evident in the KPIs by January 2018.

| A18                     | 18a              | CSMT | Sept 2017 | Implementation underway. |
|-------------------------|------------------|------|-----------|--------------------------|
| Compliance and data     | "Stop the Clock" |      | •         | ,                        |
| cleansing exercise –    | days to be used  |      |           |                          |
| ensure that all records | across teams to  |      |           |                          |
| are up to date and      | ensure that      |      |           |                          |
| accurate on the         | workflows are up |      |           |                          |
| MOSAIC system and       | to date.         |      |           |                          |
| outstanding workflow    |                  |      |           |                          |
| items are dealt with.   |                  |      |           |                          |

#### How will we know if this has been effective?

Impact on KPIs – DIRECT. Data on the MOSAIC system will be up to date and recording quality will be high.

Impact on KPIs –CONSIQUENTIAL. – The records of children and families will be accurate and robust decision making evident without outstanding workflow items.

### By When? - October 2017.

| A19                   | 19a               | CDU           | There will be an honest  | 1 <sup>st</sup> draft 11 <sup>th</sup> |
|-----------------------|-------------------|---------------|--------------------------|--|
| Support collation of  | Review            | supporting    | appraisal submitted to   | September                              |
| the OFSTED self- view | information       | Josie Lee and | OFSTED which is clearly  | Final draft 26 <sup>th</sup>           |
| tool as part of pilot | required for self | Amanda        | demonstrates that        | Sept.                                  |
| exercise.             | assessment for    | Whitehead     | Blackpool leaders have a |  |

| Sol            | social care and   |               | clear evidenced based       |                          |  |
|----------------|-------------------|---------------|-----------------------------|--------------------------|--|
|                | education and     |               | view of the performance,    |                          |  |
|                | upport a focus    |               | practice and                |                          |  |
|                | on –              |               | improvement journey for     |                          |  |
| 1              | . – What do we    |               | Social Care and Education   |                          |  |
|                | know about        |               | and that there are plans    |                          |  |
|                |                   |               | -                           |                          |  |
|                | quality of        |               | in place to deliver further |                          |  |
|                | practice and      |               | improvements which are      |                          |  |
|                | leadership in     |               | effective and sustainable.  |                          |  |
|                | each area         |               |                             |                          |  |
| 2              | 2 – How do we     |               |                             |                          |  |
|                | know this/        |               |                             |                          |  |
|                | supporting        |               |                             |                          |  |
|                | evidence          |               |                             |                          |  |
| 3 ·            | – Plans for the   |               |                             |                          |  |
| ne             | ext 12 months     |               |                             |                          |  |
|                | to improve.       |               |                             |                          |  |
|                | 19b               | Josie Lee and |                             | 13 <sup>th</sup> October |  |
|                | Positive          | Amanda        |                             |                          |  |
| c <sup>†</sup> | challenge from    | Whitehead     |                             |                          |  |
| l l            | critical friends" |               |                             |                          |  |
|                | prior to          |               |                             |                          |  |
|                | submission        |               |                             |                          |  |
|                | ·                 |               |                             |                          |  |